

EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF <u>QOD</u>8

Form 504, Rev. 7/04

(Fill in year.)

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Instructions	then Da
Print in ink or type.	1211-00
Complete form and return with \$110 registration fee to the Board of Ethics.	Abl Insulmose
2415 Quail Dr., 3rd Floor, Betro Rouge, LA 70808, (225) 763-8777 or	CAT 10070808
(800) 842-6630.	1 1/0.0
 Initial registrations must be submitted within 5 days of (1) employment as a 	
labbyist or (2) first action requiring registration. Registrations expire as of	Act.
December 31 unless a renewal is submitted between December 1 and January 31.	I OCKY
anally CV	**************************************
I. NAME BUCKLEY DOROTHY A.	
Lest First MI	3070629
20150 NOTE NO. 100 NO.	00,0029
2. BUSINESS PHONE 212-850-1804	<u> </u>
Area Code and Phone Number	
	27 p. 1.
10 000 Cd20	7. HOLD
3. FAX NUMBER 212-922-5732	E M
	6 ∴
4. BUSINESS ADDRESS 100 PARK AVENUE NY	114 10017
The state of the s	N 1 10017
Street and No. City	State Zig
A	
MAILING ADDRESS 100 PARK AVENUE NY	NY 10017
Street and No. City	State Zip
989 8221 1899	
S. EMPLOYER JAWSELIGMAN 400. INC.	P65
S. EMPLOYER OF COCTOT INTO TOO THE	
100 Malla 5 1 11	1
S. EMPLOYER'S ADDRESS 100 PARK AVENUE UN STORE	10017
Street and No. City State	Zip
7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of	
you represent; (c) the type of business each is engaged in or the purpose or function of the organization	n or group; (d) whether or not the client
or someone clae pays you to lobby.	
I. Name	
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Address	
Blushess or perpose	
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Does this person pay you?	
IF No, who pays you?	
10 10 10 10 10 10 10 10 10 10 10 10 10 1	sering numbered pages were
b)a	ank and had no information

Page 1 of

on them.

Executive Lobbyist Registration No.

EXECUTIVE LOBBYING REGISTRATION FORM

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Executive Lebbyist Registration No.

2.	Name	- 22	80	7/	40.146.0
	Address			- 75	
	Business or purpose		₩		0.00
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	If No, who pays you?				
0.00	Name				
	Address		NEAS-		
	Business or purpose				
	Does this person pay you?				
	If No, who pays you?		1201 S	600.0	100
	Name			5000 53	
	Address		10***		
	Business or purpose	28 37 SEC.	· <u>-</u>		-
	Does this person pay you?				
	If No, who pays you?				

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbylst

PHOTO

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FILE

ATTACH